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**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

ADDRESS (number and street)



Check if different
than previously
reported: (ACC)

C00343384 091906 N 298
DANIEL P FERRIS
SECURA INSURANCE A MUTUAL COMP
ANY PAC (SECURA INS PAC)
12401 S MEMORIAL DRIVE
APPLETON WI 54915

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00343384

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

4. TYPE OF REPORT
(Choose One)

(a) Quarterly Reports:



April 15
Quarterly Report (Q1)



July 15
Quarterly Report (Q2)



October 15
Quarterly Report (Q3)



January 31
Year-End Report (YE)



July 31 Mid-Year
Report (Non-election
Year Only) (MY)



Termination Report
(TER)

(b) Monthly
Report
Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)
(Non-Election
Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)
(Non-Election
Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on



in the
State of



(d) 30-Day
POST-Election
Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on



In the
State of



5. Covering Period

04

01

2016

through

06

30

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Daniel P. Ferris

Signature of Treasurer

Date

07

25

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
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FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SECURA INSURANCE AMUTUAL COMPANY PAC (SECURA INSTAC)

Report Covering the Period:

From:

04 / 01 / 2016

To:

06 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		2246.00
(b) Cash on Hand at Beginning of Reporting Period	3,333.00	
(c) Total Receipts (from Line 19)	1,087.00	2,221.21
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	4,420.00	4,467.21
7. Total Disbursements (from Line 31)	775.00	822.21
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3,645.00	3,645.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

2016-07-29 PM 00:00:11.3

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II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share			
(ii) Non-Federal Share			
(b) Other Federal Operating Expenditures		25.00	72.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))			
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		750.00	750.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees			
(b) Political Party Committees			
(c) Other Political Committees (such as PACs)			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))			
29. Other Disbursements			
30. Federal Election Activity (52 U.S.C. § 30101(20))			
(a) Allocated Federal Election Activity (from Schedule H6)			
(i) Federal Share			
(ii) "Levin" Share			
(b) Federal Election Activity Paid Entirely With Federal Funds			
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))			
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..		770.00	822.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)		775.00	822.21

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1,062.00	2,149.00
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1,062.00	2,149.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	25.00	72.21
37. Offsets to Operating Expenditures (from Line 15, page 3)	25.00	72.21
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0	0

201607260308092176

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SECURA INSURANCE, A MUTUAL COMPANY PAC (SECURA INS PAC)

Full Name (Last, First, Middle Initial)

A.

LASEE FOR CONGRESS

Mailing Address

PO BOX 5403

City

DE PERE

State

WI

Zip Code

54115

Purpose of Disbursement

POLITICAL CONTRIBUTION

Candidate Name

FRANK LASEE

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District: 8th

Date of Disbursement

05 / 26 / 2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

B.

NELSON FOR WISCONSIN

Mailing Address

PO BOX 348

City

KAUKAUNA

State

WI

Zip Code

54130

Purpose of Disbursement

POLITICAL CONTRIBUTION

Candidate Name

TOM NELSON

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District: 8th

Date of Disbursement

05 / 26 / 2016

Amount of Each Disbursement this Period

250.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

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Federal Election Commission
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